



COMMONWEALTH OF PUERTO RICO
OFFICE OF THE COMMISSIONER OF INSURANCE

CERTIFICATION BY COMPANY

I, the undersigned, acting under proper authority do hereby certify:

1. That, _____ desires to appoint
(Insurance Company)
_____ as nonresident producer and that the
(Name of applicant)
named applicant is domiciled in _____.

2. That the appointing Insurance Company intends to engage in a bonafide way in the business of insurance.

3. That the appointment is not made to permit the named applicant to solely write insurance on its own property, the property of its members, partners or directors or their lives or other risks pertaining to the corporation or firm or to its directors, partners or members.

Dated _____

(Signature of Officer)

(Title)

(Insurance Company)

COMPANY SEAL

Additional documents to be submitted:

1. Power of Attorney as required by Article 9.280 of the Insurance Code of Puerto Rico, as amended by Law Number 10 of January 19, 2006 effective May 19, 2006 in the form herein enclosed.
2. Declarations called for by items 21 (a) and (b)/21(a) and (b) of this Application for Non Resident License
3. Completed individual application for each one of the individuals mentioned on item 20 of this Application who shall be authorized to act on behalf of the corporation or partnership.